

FAMILY PLANNING
POLICY AND PROCEDURES

Effective July 1, 2001

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APPENDIX

BIRTH CONTROL METHODS

I. INTRODUCTION

A. Definition

Family planning encompasses an array of educational, medical, and social services designed to assist individuals with freely determining the number and spacing of children.

B. Purpose

This policy has been developed to provide child welfare staff with guidance on their role when individuals request information and assistance with contraception and pregnancy options.

C. Individuals Appropriate For Family Planning Services

Individuals appropriate for family planning services include females of childbearing age (normally between ages 10 and 55 years) and males of any age who may be sexually active.

II. GENERAL GUIDELINES

Individuals of a certain age or legal status have the right to make their own decisions regarding family planning, and child welfare staff must recognize and respect this right. Child welfare staff shall provide **information and referral services only**, unless otherwise ordered by the court, when individuals request information and/or assistance with family planning. This includes:

- communicating information to appropriate individuals on available family planning resources;
- participating in discussions with ISP team members when family planning has been identified as an appropriate service to meet a child's/family member's needs; and
- making referrals to agencies that provide family planning services.

A. Consent Of Minors (Code of Alabama, 1975 § 22-8-4, 22-8-5, and 22-8-6)

Generally, minors who meet any of the following criteria may consent to their own legally authorized medical, dental, health, or mental health services without the consent of any other person:

- They are age fourteen (14) or older; or
- They have graduated from high school; or
- They are married; or
- Having been married, they are divorced or are pregnant.

Minors, regardless of age, may also give consent to legally authorized medical, dental, health or mental health services for their children when:

- Minors are married; or
- Having been married, they are divorced or have borne a child.

Minors may also consent to legally authorized medical, health or mental health services without the consent of any other person in order to determine the presence of or to treat the following conditions:

- Pregnancy;
- Venereal disease;
- Drug dependency;
- Alcohol toxicity; or
- Any reportable disease.

B. Contraception

Contraception, a personal choice, can be addressed through a wide variety of methods (refer to Appendix for a glossary of more commonly used birth control methods). Child welfare staff shall refer individuals to medical personnel (e.g., Health Department, private physician, family planning clinic) for specific information on birth control so an informed decision can be made with respect to family planning. It is not appropriate for child welfare staff to explain how various methods work or to recommend a particular birth control method.

When birth control is needed or requested by minor children in foster care, parental consent is desirable, but not necessary when criteria noted under section A. Consent Of Minors are met. If the child in foster care is under age fourteen (14), parental consent must be obtained or the Juvenile Court motioned for a decision regarding consent.

Child welfare staff must file a motion with the Juvenile Court for a decision regarding consent when:

- Parental consent cannot be obtained (e.g., parent's whereabouts are unknown) for the child in foster care who is under age 14; or
- A parent is unwilling to provide consent and contraception is medically indicated for the child in foster care who is under age 14; or
- A parent is unwilling to provide consent and the ISP team has identified that

the child in foster care is under age 14 and the child's physical and/or emotional health and safety may be compromised without birth control; or

- Minors of any age have a mental limitation which renders them incapable of providing informed consent.

C. Pregnancy Options And Abortion

Alabama statutes (§ 26-22-1 through 26-22-5) provide that abortion of a viable fetus is considered criminal activity, and a fetus may reach viability any time after the twenty third (23rd) week following conception. A viability test must be performed prior to any abortion once the pregnancy has reached the nineteenth (19th) week.

Family planning services can offer pregnancy options for females (adults and minors) who are unable to care for a child and desire to make other arrangements (e.g., placing the child for adoption). Child welfare staff shall refer these individuals to the appropriate family planning resources.

1. Abortions And Minors (§ 26-21-1 through § 26-21-8)

When females under age eighteen (18), including those in DHR temporary or permanent custody, choose abortion as their pregnancy option, they may request an abortion when they are less than twenty three (23) weeks pregnant. Parental notification and consent are required unless the minor has been emancipated or petitions for a waiver of consent. Additional information on waiver of consent (also known as judicial bypass) procedures is located in the Code of Alabama, 1975 § 26-21-4.

Child welfare staff shall not participate in the planning or arranging of abortion services unless otherwise ordered by the court. Non-DHR service providers may participate in or support the child through this process, unless such assistance would violate the service provider's contract with DHR or violate the service provider's own policy and procedures.

2. Documentation

When child welfare staff participate in pregnancy options/abortion discussions with minors, the nature and extent of these discussions shall be clearly documented in the case narrative. If an abortion is performed and child welfare staff have knowledge of the circumstances, the documentation shall include:

- information on when and where the abortion occurred;
- how consent was obtained; and

- a description of any medical complications incurred as a result of the procedure or medications prescribed.

D. Payment

Many family planning services are covered by Alabama Medicaid. County Health Departments base the cost of their services, when an individual is not Medicaid eligible, on ability to pay as determined by a sliding fee scale. Services may also be paid for through individuals' private insurance.

If children in foster care are not Medicaid eligible, their personal income may be used to pay for family planning services. Local and state funds may not be used to pay for sterilization or abortion. Refer to the Administrative Manual, Chapter 5, for policy and procedures on use of local and state funds. Regardless of the funding source, the ISP must identify the need(s) that family planning services will address.